REAL ESTATE OPERATIONS SUPPLEMENTAL APPLICATION

1. Please complete the appropriate sections stating the annual gross commissions and/or fees earned during the last twelve months:

(a)	Real Estate Sales/Brokerage Number of Transactions	\$
(b)	Real Estate Property Management Types of Properties Managed	\$
(c)	Real Estate Appraisals Number of Appraisals	\$
(d)	Mortgage Brokerage Number of Loans Placed	\$
(e)	Real Estate Consulting Number of Contracts	\$
(f)	Syndication/Partnerships (Attach sample offerings, agreements, description of activities)	\$
(g)	Property Development and/or Construction (Attach detailed description of operations)	\$
(h)	Real Estate Leasing Services	\$
	Total Commission/Fees	\$

2. Indicate the percentage of total income derived from the following:

Commercial	%
Residential	%
Industrial	%
Agricultural	%
Undeveloped Land	%
Other (describe)	%

3. Are sales personnel employees or independent contractors?

If independent contractors, please provide us with a sample contract.

Please complete the following if you manage properties:

(a) Is a budget plan prepared for each property managed? () YES () NO

If NO, explain. _____

(b) Is firm involved in space merchandising? () YES () NO

If YES, please give details.

(c) Are credit reports obtained on prospective tenants? () YES () NO

If YES, explain. _____

(d) Are you responsible for negotiating, effecting or maintaining insurance coverage on properties managed? () YES () NO

If YES, explain.

(e) Indicate percentage of management fees derived from property:

Commercial _____% Residential _____%

- (f) Attach a sample property management contract/agreement.
- 4. Does the applicant or any person for whom insurance is being requested have any ownership or equity interest in any property being managed or held for sale? () YES () NO

If YES, please attach a schedule of such properties and interests.

5. Do you offer any home warranty/protection plans? () YES () NO

If YES, advise name of plans and percentage of transactions involving such plans.

6. Do you have procedures in place designed to prevent fair housing claims? () Yes () No

If YES, please describe.

It is understood and agreed that this supplemental application shall become a part of the application for Professional Liability Errors & Omissions Insurance.

Date

Name of Applicant

Signature of person authorized
to execute on behalf of the Applicant